

Perspective

Importance of Physical Activity Implementations for Pregnant Women

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DESCRIPTION

Physical exercise is considered safe and beneficial for pregnant women without contraindications to exercise. Regular physical activity throughout all phases of life, including pregnancy, promotes health benefits. Pregnancy is a perfect time for maintaining or adopting a healthy lifestyle. Exercise during pregnancy has several benefits, which include a reduced risk of excessive gestational weight gain, a decreased risk of gestational diabetes, and a reduced risk of preeclampsia. Decreased caesarean births better postpartum recovery and prevents postpartum depression. Exercise can help prevent relevant pregnancy-related disorders such as hypertensive disorders, enuresis, foetal macrosomia, lumbopelvic pain, anxiety, and prenatal depression. The very fact that pregnant women are not properly advised on this matter, together with concerns regarding the potential risks associated with exercise, contributes to the abandonment or refusal to start exercising during this period. Pregnancy is related to physiological adaptions. Physically active pregnant women have lower rates of preterm birth, altered foetal growth, miscarriage, prolonged caesarean delivery and postpartum recovery, and injury risk for both mother and baby. It can also be an essential factor in the prevention of depressive disorders in women in the postpartum period. It can help to prevent diseases like type 2 diabetes and benefit people overall health. It improves the sleep of the mother.

It plays a big role in maternal health; therefore, creating awareness of its benefits and contraindications may change women's negative attitudes toward physical activity and set the stage for better maternal outcomes, which could decrease the burden of preventable pregnancy-related conditions on the healthcare system. The main form of physical activity performed by pregnant women was household activities. Exercise and general activities generally decrease over the course of pregnancy, an element associated with tiredness. Pregnancy leads to anatomic and physiologic changes that should be considered when prescribing exercise. The most prominent distinct changes during pregnancy are weight gain and a shift in the point of gravity that results in progressive lordosis. Moderate to Vigorous

Physical Activity (MVPA) is proven to be beneficial for both mother and foetus in most pregnancies with the required modifications. They should begin with low-intensity physical activity and gradually increase frequency, intensity, and duration over time. Hormones like relaxin loosen ligaments, which could increase people risk of joint injuries. The decreased physical activity level of pregnant women is partially thanks to pregnancy-associated side effects like fatigue, nausea, or back pain, as well as general weight gain. Other reasons include concern about possible damage to the unborn child such as miscarriage, premature birth or accidents during sports. Pregnant and postpartum women should limit the amount of time spent being sedentary. Replacing sedentary time with physical activity of any intensity (including light intensity) provides health benefits.

Avoid participating in activities that involve physical contact, pose a high risk of falling, or might limit oxygenation. Avoid supine activities after the first trimester of pregnancy, as this can result in decreased cardiac output, aortal-caval compression, and hypotension. Pregnant women considering athletic contests or exercising significantly above the recommended guidelines should seek supervision from a specialist healthcare provider. In pregnant women who exercised during which physical activity was self-paced in a temperature-controlled environment, core body temperatures rose but only by 1.5°C for over half an hour and stayed within safe limits. Perform controlled stretching and avoid over-extending. Avoid exercise if people are ill or feverish. It's important to listen to people body to avoid unnecessarily depleting people energy reserves. Patients prescribed prolonged bed rest or restricted physical activity is in danger of venous thromboembolism, bone demineralization, and deconditioning. Women who keep fit during pregnancy are more relaxed and cope better with the emotional and physiological strains of pregnancy. Physical activity and exercise are associated with minimal risks and have been shown to benefit the majority of women, though some modifications to exercise routines may be required due to normal anatomic and physiologic changes and foetal requirements.

Physical activity and exercise during pregnancy have been shown to pose minimal risk and benefit most women, but due to

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normal anatomical and physiological changes and foetal requirements, in exercise routines. Some changes may be needed. In the absence of obstetric or medical complications or contraindications, during pregnancy is safe and desirable, and pregnant women should be encouraged to continue or initiate safe physical activity. Physical activity and exercise during pregnancy can promote physical fitness and prevent excessive weight gain during pregnancy. Exercise may reduce the risk of

gestational diabetes, preeclampsia, and caesarean birth. Additional research is needed to study the effects of exercise on pregnancy specific conditions and outcomes and to clarify further effective behavioral counseling methods and the optimal type, frequency, and intensity of exercise. Similar research is needed to create an improved evidence base concerning the effects of occupational physical activity on maternal foetal health.

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